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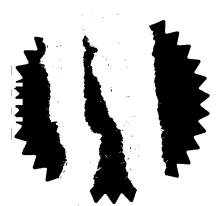


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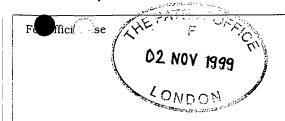
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Dated 14 June 2000

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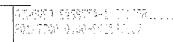
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Your reference PCS10370JWM-PROV

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Notes

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Patent Office

Request for grant of a Patent

Patents Act 1977

1 Title of invention

TREATMENT OF PULMONARY HYPERTENSION

Please give the title of the invention

2 Applicant's details

- First or only applicant
- 2a If you are applying as a corporate body please give:

Form 1/77

Corporate name

PFIZER LIMITED

Country (and State of incorporation, if appropriate)

UNITED KINGDOM

2b If you are applying as an individual or one of a partnership please give in full:

Surname

Forenames

2c In all cases, please give the following details:

Address RAMSGATE ROAD SANDWICH

KENT

(89 2673 00)

UK postcode CT13 9NJ (if applicable)

Country UNITED KINGDOM

ADP number (if known)

	Second applicant (if any)
ed, 2e and 2f : f there are further applicants please provide details on a separate cheet of paper.	2d If you are applying as a corporate body please give: Corporate name
	Country (and State of incorporation, if appropriate)
	2e If you are applying as an individual or one of a partnership please give in full:
	Surname
	Forenames
	2f In all cases, please give the following details:
	Address
	UK postcode (if applicable)
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3	3 Address for service details
An address for service in the United Kingdom must be supplied. Please mark correct box	3a Have you appointed an agent to deal with your application?
	Yes X No go to 3b
	Please give details below Agent's name
	J. W. MOORE
	Agent's address PFIZER LIMITED
	RAMSGATE ROAD 5 (2932400)
	SANDWICH
	Postcode CT13 9NJ
	Agent's ADP number
Bb:	3b If you have not appointed an agent please give a name and address in the Uni
If you have appointed an agent, all correspondence concerning your application will be sent to the agent's United Kingdom address.	Kingdom to which all correspondence will be sent:
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, <i>(i)</i>	4 Reference number 4 Agent's or applicant's reference number (if applicable)		ROV	
	5 Claiming an earlie 5 Are you claiming tha of filing of an earlier	t this application be treated as	having been filed on the date	
Please mark correct box	Yes No X	go to 6		
	number of earlier application or patent number			
	filing date	(day month year)		
		e Patents Act 1977 under whic	h you are claiming:	
Please mark correct box	15(4) (Divisional)	8(3) 12(6) 37(4)		
6 If you are declaring priority from a PCT Application please enter 'PCT'	6 Declaration of priority 6 If you are declaring priority from previous application(s), please give:			
as the country and enter the country		•		
as the country and enter the country code (for example, GB) as part of the application number.		Priority application number (if known)	Filing date (day,month,year)	
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7	7 Inventorship		
The answer must be 'No' if: - any applicant is not an inventor - there is an inventor who is not	7 Are you (the applicant or applicants) the sole inventor or the joint inventors?		
an applicant, or any applicant is a corporate body.	Please mark the correct box Yes No X A statement of Inventorship on Patents Form 7/77 will need to be filed (see Rule 15).		
8	8 Checklist		
Please supply duplicates of claim(s), abstract, description and drawing(s).	8a Please fill in the number of sheets for each of the following types of document contained in this application.		
	Continuation sheets for this Patents Form 1/77		
	Claim(s) 1 Description 4		
	Abstract Drawing(s)		
	8b Which of the following documents also accompanies the application?		
	Priority documentsplease state how many)		
	Translation(s) of Priority documentalease state how many)		
Please mark correct box(es)	Patents Form 7/77 - Statement of Inventorship and Right to Grant (please state how many)		
	Patents Form 9/77 - Preliminary Examination/Search		
	Patents Form 10/77 - Request for Substantive Examination		
9	9 Request		
You or your appointed agent (see Rule 90 of the Patents Rules 1990) must sign this	I/We request the grant of a patent on the basis of this application.		
request.			
Please sign here	Signed Date 01/11/1999		
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TREATMENT OF PULMONARY HYPERTENSION

This invention relates to the use of the compound sildenafil, for the treatment of pulmonary hypertension.

Pulmonary hypertension is a pathological condition in which the pulmonary artery pressure rises above normal levels and may cause sequelae of haemodynamic changes that can become life threatening. Symptoms of pulmonary hypertension include shortness of breath with minimal exertion, fatigue, dizzy spells and fainting. When pulmonary hypertension occurs in the absence of a known cause, it is referred to as primary pulmonary hypertension. Primary pulmonary hypertension is rare occurring in about 2 per million people worldwide.

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Secondary pulmonary hypertension is much more common occurring as a result of other medical conditions, including congestive heart failure, chronic hypoxic lung disorder, including chronic obstructive pulmonary disease, inflammatory or collagen vascular diseases such as scleroderma and systemic lupus erythematosus, congenital heart diseases associated with left to right shunting and pulmonary thromboembolism.

Sildenafil (Viagra [®]) is an orally-active, potent and selective inhibitor of cyclic guanosine monophosphate (cGMP) specific phosphodiesterase type 5 (PDE5) which is the predominant PDE isoenzyme in human corpora cavernosa. Consequently, it has been shown to be effective in the treatment of male erectile dysfunction. PDE5 is selectively abundant in the pulmonary vasculature compared to systemic vessels. Sildenafil increases intracellular concentrations of nitric oxide (NO) derived cGMP, thereby enhancing the effect of NO, and thus has potential to reverse metabolic and vascular defects in subjects with pulmonary hypertension.

It is known that inhaled NO stimulates the production of cGMP in pulmonary vascular smooth muscle cells resulting in selective pulmonary vasodilation. Recently, it has been observed that administration of inhaled NO to subjects with severe pulmonary hypertension resulted in significant decreases in pulmonary artery pressure and pulmonary vascular resistance without concomitant systemic hypotension. However the dose of inhaled NO is potentially limited by the formation of nitrogen dioxide, peroxynitrite or other toxic by-products. PDE5 is selectively abundant in the pulmonary vasculature in comparison to the systemic vessels and it has been observed that PDE5 is upregulated in pathological conditions leading to increase in pulmonary pressure. Sildenafil as a PDE5 inhibitor is expected to increase the level of cGMP and thus prolong the beneficial effect of the reduction of pulmonary blood pressure caused by NO with little effect on systemic blood pressure.

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The use of phosphodiesterase inhibitors administered endotracheally or endobronchially (i.e. by inhalation) to treat pulmonary hypertension has been described in WO95/09636 but the compounds employed were neither particularly potent nor selective cGMP PDE inhibitors.

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Sildenafil (5-[2-ethoxy-5-(4-methylpiperazin-1-ylsulfonyl)phenyl]-1,6-dihydro-1-methyl-3-propylpyrazolo[4,3-d]pyrimidin-7-one) and its preparation are described in European patent 0463756.

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Thus according to the present invention we provide a method of treating a patient with pulmonary hypertension which comprises treating the patient with an effective amount of sildenafil or a pharmaceutical composition thereof.

The invention also provides for the use of sildenafil for the manufacture of a composition for treating pulmonary hypertension.

For use in the present invention sildenafil is preferably administered as a pharmaceutical composition. Thus, the compound can be administered in any conventional oral, parenteral, or transdermal dosage form, usually with a pharmaceutically acceptable carrier or diluent. Sildenafil is preferably employed in the form of its citrate salt but other pharmaceutically acceptable salts may also be used.

For oral administration a pharmaceutical composition can take the form of a solution, suspension, tablet, pill, capsule, powder or the like. Tablets containing various excipients such as sodium citrate, calcium carbonate and calcium phosphate are employed along with various disintegrants such as potato or tapioca starch and certain complex silicates, together with binding agents such as polyvinylpyrrolidone, sucrose, gelatin and acacia. Additionally, lubricating agents such as magnesium stearate, sodium lauryl sulfate and talc are often used for tabletting purposes. Solid compositions of a similar type are also employed as fillers in soft and hard-filled gelatin capsules; preferred materials in this connection also include lactose or milk sugar as well as high molecular weight polyethylene glycols. When aqueous suspensions and/or elixirs are desired for oral administration, the compounds can be combined with various sweetening agents, flavoring agents, colouring agents, emulsifying agents and/or suspending agents, as well as such diluents as water, ethanol, propylene glycol, glycerin and various like combinations thereof.

For purposes of parenteral administration, solutions in sesame or peanut oil or in aqueous propylene glycol can be employed, as well as sterile aqueous solutions of the corresponding water-soluble salts. Such aqueous solutions may be suitably buffered, if necessary, and the liquid diluent first rendered isotonic with sufficient saline or glucose. These aqueous solutions are especially suitable for intravenous, intramuscular, subcutaneous and intraperitoneal injection purposes. In this connection, the sterile aqueous media employed are all readily obtainable by standard techniques well-known to those skilled in the art.

Sildenafil may also be administered as an inhaled formulation and this may have advantages in delivering the active compound directly to the lung area. Suitable formulations for inhaled administration are described in our co-pending British patent application number 911826.7.

Methods of preparing various pharmaceutical compositions with a certain amount of active ingredient are well known to those skilled in this art, or may be determined by reference to literature precedents.

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The exact dose of sildenafil administered will, of course, differ depending on the subject being treated, on the severity of the condition, on the manner of administration and on the judgment of the prescribing physician. Thus, because of patient-to-patient variability, the dosages given below are a guideline only and the physician may adjust doses of the compounds to achieve the treatment that the physician considers appropriate for the patient. In considering the degree of treatment desired, the physician must balance a variety of factors such as the age of the patient and the presence of other diseases or conditions (e.g. cardiovascular disease). In general, the compound will be administered in a range of from 0.5 to 300 mg per day, preferably 5 to 125 mg per day, more preferably 25-100 mg per day.

Sildenafil may also be administered in conjunction with the administration of nitric oxide to treat pulmonary hypertension.

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In addition to treatment of adult patients, a further application of the invention is in the treatment of very young children born with congenital heart disease. Sildenafil can be used to treat pulmonary hypertension in such subjects and can thus delay the immediate need for surgery until the patient is better able to withstand the trauma of surgery. Sildenafil can also be used to treat children who have pulmonary hypertension post operatively or due to respiratory distress syndrome or neonatal hypoxia.

CLAIMS

- A method of treating a patient suffering from pulmonary hypertension which
 comprises treating said patient with an effective amount of sildenafil or a pharmaceutical composition thereof.
 - 2. The use of sildenafil for the manufacture of a pharmaceutical composition for the treatment of pulmonary hypertension.

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